

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number WA7890008967	2. Page 1 of 1	3. Emergency Response Phone (888) 766-0771	4. Manifest Tracking Number 001553554 JJK		
5. Generator's Name and Mailing Address US DOE IN CARE OF CH2M HILL PLATEAU REMEDIATION CO PO BOX 1600 ATTN: WFMP UHWM RTN MS:T4-04 RICHLAND WA 99352 (509)372-1826				Generator's Site Address (if different than mailing address) US DOE IN CARE OF CH2M HILL PLATEAU REMEDIATION CO 2355 STEVENS DRIVE RICHLAND WA 99354			
6. Transporter 1 Company Name MP ENVIRONMENTAL SERVICES				U.S. EPA ID Number CAT00624247			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address CWMNW, INC 17629 CEDAR SPRINGS LANE ARLINGTON OR 97812 (541)454-2643				U.S. EPA ID Number ORD089452353			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	RQ	1. NA2212, ASBESTOS, 9, PG III, (FRIABLE ASBESTOS)	1	CM FB CM Sm 9/26/12	16.2	Y	X004
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information RETURN TO GENERATOR IF UNABLE TO DELIVER 1. #OR297708; FRIABLE ASBESTOS BUILDING DEBRIS W/ASN-4 FORM ERG 171 (RQ = 1LB) SHIPMENT NUMBER 45080-MS030 TOTAL GROSS WEIGHT: 17.632 lbs 9/25/12 Trailer #484412 ORANGE PANELS NA2212 DISPLAYED TOC JAMES MCGROGAN 509-554-9963							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name JAMES MCGROGAN				Signature <i>James P Mc Grogan</i>		Month Day Year 09 25 12	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	Transporter signature (for exports only): _____						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Michael Crause				Signature <i>Michael Crause</i>		Month Day Year 09 25 12
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name				Signature		Month Day Year
	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)							
Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name Amy Jewett				Signature <i>Amy Jewett</i>		Month Day Year 09 26 12	

ASN 4

ASBESTOS WASTE SHIPMENT REPORT FORM



PLEASE PRINT OR TYPE! If you have questions, contact your local DEQ Regional Office in Gresham at (503) 667-8414 x 55018, Salem at (503) 378-5086, Medford at (541) 776-6010 ext. 235, or Bend at (541) 388-6146 ext. 226, Pendleton (541) 278-4626, OR call (800) 452-4011 for the location of your local regional DEQ office.

WASTE GENERATOR: (Contractor, Facility, or Operator)

1. Asbestos removal site name and address: U.S. Department of Energy c/o Plateau Remediation Contract
PO Box 1600 Richland WA Benton 99,352
 Street City/State County Zip
 Contact person: Jeff Westcott Phone: 509- 942-8905
2. Operator's name and address: Plateau Remediation Contract Phone: 509- 942-8905
PO Box 1600 MISN Richland WA Benton 99,352
 Street City/State County Zip
3. Waste disposal site: Chemical Waste Management of the North West Phone: 541-454-3220
17629 Cedar Springs Lane Arlington OR Gilliam 97812
 Street City/State County Zip
4. Describe asbestos materials: Wetted doubled bagged, friable asbestos PSN RQ Asbestos 9, NA2212 PGIII
5. Containers: Number: RO/RO box CM Type: Piping insulation
6. Total quantity (cubic yards): 30-16

7. **OPERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to all government regulations. All movement of this asbestos-containing material is recorded on this Waste Shipment Record Form.

Name: Brad Purvis Company: Plateau Remediation Contract
 Signature: [Signature] Date: 9/25/12

TRANSPORTER(S):

8. Transporter #1: (Acknowledgment of receipt of materials)
 Agent: Michael Curran Company: WPE Environmental
 Address: 3875 Hwy 30 The Dalles OR Phone: 541-980-0476
 Signature: _____ Date: _____
9. Transporter #2: (Acknowledgment of receipt of materials)
 Agent: _____ Company: _____
 Address: _____ Phone: _____
 Signature: _____ Date: _____

DISPOSAL: (Certification of receipt of asbestos materials covered by this manifest, except as noted in item 11 below.)

10. Waste Disposal Site: Chemical Waste management of Northwest
 Name and Title: Amy Jewett Receiving Date: 09-25-12
 Signature: [Signature] Phone: 541-580-0476
541-454-2030
11. **DISCREPANCY SPACE:** (Add attachments as needed)

AJ 9/20/12